


UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No. 9065M	
	First Inventor Vladimir Gartstein et al.	
	Assignee	The Procter & Gamble Company
	Title	Dynamic Electrostatic Aerosol Collection Apparatus For Collecting And Sampling Airborne Particulate Matter
Express Mail Label No. EV 325509101 US		U.S. PTO 10/697229 103003
APPLICATION ELEMENTS See MPEP Chapter 600 concerning utility patent application contents.		
ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450		
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing) 2. <input checked="" type="checkbox"/> Specification Total Pages [25] (preferred arrangement set forth below) - Descriptive Title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 3. <input checked="" type="checkbox"/> Drawing(s) (35 USC §113) Total Sheets [3] 4. Oath or Declaration Total pages [2] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR §1.63(d)) (for continuation/divisional with Box 17 complete) i. <input type="checkbox"/> DELETION OF INVENTORS Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR §§1.63(d)(2) and 1.33(b). 5. <input type="checkbox"/> Application Data Sheet. See 37 CFR §1.76 6. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statement verifying identity of above copies		
ACCOMPANYING APPLICATION PARTS 8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee) 10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449/SB08 Citations 12. <input type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 15. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 16. <input type="checkbox"/> Other:		
17. If a CONTINUING APPLICATION , check appropriate box and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR §1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No. <u>/</u> Prior application information: Examiner: _____ Art Unit: _____ For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.		
19. CORRESPONDENCE ADDRESS		
[X] Customer Number		(Insert Customer No. here) 27752

Name (Print/Type)	Frank Taffy	Registration No. (Attorney/Agent)	52,270
Signature		Date	30 October 2003

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



FEE TRANSMITTAL

for FY 2004

Patent fees are subject to annual revision.

Compleat if Known

Application Number	
Confirmation Number	
Filing Date	October 30, 2003
First Named Inventor	Vladimir Gartstein et al.
Examiner Name	
Art Unit	
Attorney Docket No.	9065M

TOTAL AMOUNT OF PAYMENT (\$)982.00**METHOD OF PAYMENT**

1. ☒ The Director is hereby authorized to charge indicated fees submitted on this form, credit any over payments, and charge any additional fee(s) during the pendency of this application to:

Deposit Account Number: **16-2480**Deposit Account Name: **The Procter & Gamble Company****FEE CALCULATION****1. BASIC FILING FEE – Large Entity**

Code (\$)	Fee Description	Fee Paid
1001 770	Utility filing fee	[770]
1002 340	Design filing fee	[]
1004 770	Reissue filing fee	[]
1005 160	Provisional filing fee	[]
SUBTOTAL (1)		(\$)[770]

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE – Large Entity

		Extra	Fee from	Fee
		Claims	Below	Paid
Total Claims	[27] - 20** =	[7] x	[18]	= [126]
Independent Claims	[4] - 3** =	[1] x	[86]	= [86]
Multiple Dependent			[]	= [0]

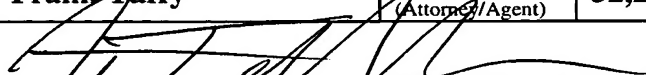
** or number previously paid, if greater; For Reissues, see below

Code (\$)	Fee Description
1202 18	Claims in excess of 20
1201 86	Independent claims in excess of 3
1203 290	Multiple dependent claim, if not paid
1204 86	**Reissue independent claims over original patent
1205 18	**Reissue claims in excess of 20 & over original patent

SUBTOTAL (2) (\$)[212]**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Code (\$)	Fee Description	Fee Paid
1051 130	Surcharge-late filing fee or oath	[]
1052 50	Surcharge-late provisional filing fee or cover sheet	[]
1053 130	Non-English specification	[]
1812 2,520	For filing a request for <i>ex parte</i> reexamination	[]
1804 920*	Requesting publication of SIR prior to Examiner's action	[]
1805 1,840*	Requesting publication of SIR after Examiner's action	[]
1251 110	Extension for reply within 1 st month	[]
1252 420	Extension for reply within 2 nd month	[]
1253 950	Extension for reply within 3 rd month	[]
1254 1,480	Extension for reply within 4 th month	[]
1255 2,010	Extension for reply within 5 th month	[]
1401 330	Notice of Appeal	[]
1402 330	Filing a brief in support of an appeal	[]
1403 290	Request for oral hearing	[]
1451 1,510	Petition to institute a public use proceeding	[]
1452 110	Petition to revive - unavoidable	[]
1453 1,330	Petition to revive - unintentional	[]
1501 1,330	Utility issue fee (or reissue)	[]
1502 480	Design issue fee	[]
1460 130	Petitions to the Commissioner	[]
1807 50	Processing fee under 37 C.F.R. 1.17(q)	[]
1806 180	Submission of Information Disclosure Statement	[]
1809 770	Filing a submission after final rejection (37 CFR § 1.129(a))	[]
1810 770	For each additional invention to be examined (37 CFR § 1.129(b))	[]
1801 770	Request for Continued Examination (RCE)	[]
1802 900	Request for expedited examination of a design application	[]
1454 1330	Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)	[]
Other fee (specify) _____		[]
Other fee (specify) _____		[]

* Reduced by Basic Filing Fee Paid **SUBTOTAL (3) (\$)** []**SUBMITTED BY**

Name (Print/Type)	Frank Taffy	Registration No.	52,270	Complete (if applicable)	
Signature		(Attorney/Agent)		Telephone	(513) 634-9315
				Date	30 October 2003

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